

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Graves for Congress

ADDRESS (number and street)

2345 Grand, Suite 2400

☐Check if different
than previously
reported. (ACC)

Kansas City

MO

64108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00359034

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

MO

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

11

25

2008

through

12

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jean Paul Bradshaw

Signature of Treasurer

Electronically Filed by Jean Paul Bradshaw

Date

03

06

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Graves for Congress

Report Covering the Period:

From:

M M
1 1D D
2 5Y Y Y Y
2 0 0 8

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	15425.08	2396475.95
(b) Total Contribution Refunds (from Line 20(d)).....	145.08	27877.44
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15280.00	2368598.51
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	33197.59	2633805.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	12552.99	56777.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20644.60	2577027.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	42845.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	196124.51	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Graves for Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	5	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	8

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

9230.00

1076708.83

(ii) Unitemized.....

3195.08

69035.48

(iii) TOTAL of contributions
from individuals..... ▶

12425.08

1145744.31

(b) Political Party Committees.....

0.00

38979.03

(c) Other Political Committees
(such as PACS).....

3000.00

1211752.61

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

15425.08

2396475.95

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

16486.68

189507.52

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

10000.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

10000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

12552.99

56777.75

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

73.45

16619.46

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

44538.20

2669380.68

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	33197.59	2633805.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	41000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	145.08	20245.08
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7632.36
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	145.08	27877.44
21. OTHER DISBURSEMENTS.....	0.00	7475.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	33342.67	2710157.50

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	31650.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	44538.20
25. SUBTOTAL (add Line 23 and Line 24).....	76188.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33342.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	42845.76

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

ACCAPAC

Mailing Address 2800 Shirlington Ste. 300

City

Arlington

State

VA

Zip Code

22206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 8

Transaction ID: 90121.C13108

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Boehringer Ingelheim PAC

Mailing Address 1201 pennsylvania Ave, NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 8

Transaction ID: 90121.C13109

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Larry W. Anderson

Mailing Address 729 Franklin Pl

City

Maryville

State

MO

Zip Code

64468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Savannah R-III

Occupation

Teacher

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90121.C13249

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Diane L. Berkowitz

Mailing Address 4240 SW Peak Dr.

City

Polo

State

MO

Zip Code

64671

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13153

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Norman O. Besheer

Mailing Address 220 W. 72nd Street

City

Kansas City

State

MO

Zip Code

64114-5742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gunter Pest Management

Occupation

Chairman & CEO

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13176

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

V. Edward Bird

Mailing Address 30 NW Greentree Lane

City

Kansas City

State

MO

Zip Code

64116-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13241

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

V. Edward Bird

Mailing Address 30 NW Greentree Lane

City

Kansas City

State

MO

Zip Code

64116-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13239

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

V. Edward Bird

Mailing Address 30 NW Greentree Lane

City

Kansas City

State

MO

Zip Code

64116-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13240

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Jerry Blakely

Mailing Address 9235 NW 60th Street

City

Kansas City

State

MO

Zip Code

64152

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13250

Amount of Each Receipt this Period

15.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Twila Boulware

Mailing Address 1125 Fairway

City

Chillicothe

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 8

Transaction ID: 90121.C13207

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Greg L. Brownell

Mailing Address 12400 SE State Road CC

City

Faucett

State

MO

Zip Code

64448

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 8

Transaction ID: 90121.C13178

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Susan Valeria Brunoff

Mailing Address 334 W. Cedar Street

City

New Holland

State

PA

Zip Code

17557

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: 90121.C13209

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

H.F. Clark

Mailing Address 13982 Highway 139

City

Sumner

State

MO

Zip Code

64681

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13211

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

D. P. Coleman

Mailing Address 7902 NW Scenic Dr.

City

Kansas City

State

MO

Zip Code

64152-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coleman Industrial Constn

Occupation

Railroad Contractor

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13212

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Betty A. Cook

Mailing Address 118 N Bryant

City

Kansas City

State

MO

Zip Code

64119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

Transaction ID: 90121.C13180

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Carole C. Coots

Mailing Address 2104 Fourth St

City

Platte City

State

MO

Zip Code

64079

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wells Bank of Platte City

Occupation

Banker

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	8

Transaction ID: 90121.C13155

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Jane Copsey

Mailing Address P.O. Box 112

City

Maitland

State

MO

Zip Code

64466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hallway Telephone Co.

Occupation

owner

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	8

Transaction ID: 90121.C13157

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

William H. Corken

Mailing Address 5484 NE Northgate Crossing

City State Zip Code
 Lees Summit MO 64064

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13181

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Rita Cosentino

Mailing Address 321 Chelmsford Ct.

City State Zip Code
 Lees Summit MO 64064

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 5600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 8

Transaction ID: 90121.C13110

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Joseph A. Courtney

Mailing Address 14015 Sharp Station Rd

City State Zip Code
 Platte City MO 64079

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 205.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13158

Amount of Each Receipt this Period

35.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1085.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Rolanda Dale

Mailing Address 25779 E. 225 Street

City

Ridgeway

State

MO

Zip Code

64481

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13159

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Judith T. Darby

Mailing Address 515 Commerical Street

City

Spickard

State

MO

Zip Code

64679

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13122

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Roger D. Durant

Mailing Address 1307 Dekalb Dr

City

Cameron

State

MO

Zip Code

64429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon State Bank

Occupation

Banker

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90121.C13123

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

J. Stephen Erickson

Mailing Address Rt. 1, Box 65A

City

Cameron

State

MO

Zip Code

64429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Pharmacist

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13183

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Charlee M. Garst

Mailing Address 610 East Cass Street

City

Rock Port

State

MO

Zip Code

64482

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Farmer

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13187

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Robert F. Geigel

Mailing Address 3204 NW Oakcrest Drive

City

Kansas City

State

MO

Zip Code

64151-2962

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13162

Amount of Each Receipt this Period

30.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

John O. Grace

Mailing Address 4405 Hillcrest Drive

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	8

Transaction ID: 90121.C13125

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B.

Full Name (Last, First, Middle Initial)

Marshall Grant

Mailing Address 14080 Highway F

City

Rothville

State

MO

Zip Code

64676

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	8

Transaction ID: 90121.C13216

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
C.

Full Name (Last, First, Middle Initial)

Robert Gunderson

Mailing Address 20789 County Rd. 306

City

Saint Joseph

State

MO

Zip Code

64505-9367

FEC ID number of contributing
federal political committee.

C

Name of Employer
JVX Animal Health, Inc.

Occupation

Director, Reg. Affairs

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	8

Transaction ID: 90121.C13217

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

David Harris

Mailing Address 807 Kristen St.

City

Cameron

State

MO

Zip Code

64429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 90121.C13126

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Sharon L. Holt

Mailing Address 3119 N.W. 58th Terrace

City

Kansas City

State

MO

Zip Code

64151-3493

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Private Reading Instructor

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 8

Transaction ID: 90121.C13219

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

John J. Houlehan, Jr.

Mailing Address 6917 N.W. 76th Place

City

Kansas City

State

MO

Zip Code

64152-2279

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90121.C13128

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Denny Hurd

Mailing Address 9804 SW State Route JJ

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Select Logistics Inc.

Occupation

Transportation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 8

Transaction ID: 90121.C13190

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Chester C. Ishmael

Mailing Address 600 Town and Country Ln.

City

Trenton

State

MO

Zip Code

64683

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13236

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mark Jansen

Mailing Address 6530 Ridge Road

City

Kansas City

State

MO

Zip Code

64152

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

owner

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: 90121.C13164

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Dorothy Kaye

Mailing Address 12499 Kaye Road

City

Sumner

State

MO

Zip Code

64681

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13133

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Donald E. Kuenzi, M.D.

Mailing Address 924 S. Woodland Drive

City

Kansas City

State

MO

Zip Code

64118-5256

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13165

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Ray Landrum

Mailing Address 506 N. 16th St.

City

Albany

State

MO

Zip Code

64402

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Transaction ID: 90121.C13115

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Julie Maschhoff

Mailing Address 18391 Post Oak Rd.

City

Carlyle

State

IL

Zip Code

62231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90121.C13252

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Thea McGaugh

Mailing Address 3434 Craig Lane

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: 90121.C13225

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Grace L. Meek

Mailing Address 1320 E Frederick, Apt. A

City

Independence

State

MO

Zip Code

64050

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 90121.C13192

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Jack Mehaffey

Mailing Address 24139 State Highway AA

City	State	Zip Code
Tarkio	MO	64491

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired
 Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

 Election Cycle-to-Date ▼
 515.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	8

Transaction ID: 90121.C13135

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

William Mikkelsen

Mailing Address 116 The Woodlands

City	State	Zip Code
Kansas City	MO	64119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Combined Health CareOccupation
IT
 Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

 Election Cycle-to-Date ▼
 850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Transaction ID: 90121.C13245

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Wayne L. Morgan

Mailing Address P.O. Box 729

City	State	Zip Code
Saint Joseph	MO	64502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tilton Thomas & Morgan,
Inc.Occupation
Insurance Broker
 Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

 Election Cycle-to-Date ▼
 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	8

Transaction ID: 90121.C13195

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Phillip Morris

Mailing Address 30355 Hwy 159

City

Oregon

State

MO

Zip Code

64473

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

Transaction ID: 90121.C13289

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Michael Moskowitz

Mailing Address 1370 Avenue of the Americas

City

New York

State

NY

Zip Code

10019-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

mortgage banker

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	8

Transaction ID: 90121.C13117

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Dale M. Myers

Mailing Address 6818 NW Park Plaza Dr

City

Kansas City

State

MO

Zip Code

64151

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	8

Transaction ID: 90121.C13136

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Sallie Hart Potter

Mailing Address 3697 County Road 136

City

Bolckow

State

MO

Zip Code

64427

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Language Pathologist

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13197

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Adah Pyeatt

Mailing Address 710 N. 4th St.

City

Fairfax

State

MO

Zip Code

64446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 90121.C13169

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

David Reid

Mailing Address 3709 NE 95th ST

City

Kansas City

State

MO

Zip Code

64156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bryan Cave

Occupation

Partner

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13170

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Don Reynolds

Mailing Address 401 W. Santa Fe

City

Marceline

State

MO

Zip Code

64658

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Central Missouri Ba-
nk

Occupation

President

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13171

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Toni J. Sawyer

Mailing Address 2914 N. 39th Terr.

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 8

Transaction ID: 90121.C13254

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Cynthia J. Scarbrough

Mailing Address 14710 Lake Pointe Court

City

Liberty

State

MO

Zip Code

64068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scarbrough International,
Ltd.

Occupation

Secretary

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13255

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

G. W. Schluter

Mailing Address 308 NW Briarcliff Cir.

City

Kansas City

State

MO

Zip Code

64116

FEC ID number of contributing
federal political committee.

C

Name of Employer
GWS Homes, Inc.

Occupation
owner

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: 90121.C13227

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Terry F Steinbecker

Mailing Address 4718 Brookwood Terr

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sunshine Electric

Occupation
VP of Finance

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 90121.C13141

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Don B. Storment

Mailing Address 20 N. Carriage Dr.

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Investor

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 8

Transaction ID: 90121.C13230

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Herbert Sutter

Mailing Address 26287 290th St

City

Fairfax

State

MO

Zip Code

64446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	8

Transaction ID: 90121.C13142

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B.

Full Name (Last, First, Middle Initial)

Steven T. Svec

Mailing Address PO Box 552

City

Chillicothe

State

MO

Zip Code

64601-0552

FEC ID number of contributing
federal political committee.

C

Name of Employer
CMU

Occupation

Manager/Engineer

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	8

Transaction ID: 90121.C13143

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
C.

Full Name (Last, First, Middle Initial)

Robert L. Thedinger

Mailing Address 3000 Ashland Blvd

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Transaction ID: 90121.C13246

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Ronnie E. Thompson

Mailing Address PO Box 99

City

Osborn

State

MO

Zip Code

64474

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8

Transaction ID: 90121.C13199

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Wm. R. Thomson

Mailing Address Box 247

City

Maryville

State

MO

Zip Code

64468

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13172

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Phillip L. Throne

Mailing Address 17010 NE 184th

City

Holt

State

MO

Zip Code

64048

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13233

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Nancy L. Townsend

Mailing Address 26873 Isadore Ave.

City

Maryville

State

MO

Zip Code

64468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 8

Transaction ID: 90121.C13234

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Francis E. Turner

Mailing Address 10011 State Rd. H

City

Savannah

State

MO

Zip Code

64485

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: 90121.C13145

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

John F. Wallace

Mailing Address 12631 Lakeland Drive

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13202

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Maurice Warner

Mailing Address 30542 US Hwy 136

City

Unionville

State

MO

Zip Code

63565

FEC ID number of contributing
federal political committee.

C

Name of Employer
WalmartOccupation
Pharmacist

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	0	8

Transaction ID: 90121.C13258

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B.

Full Name (Last, First, Middle Initial)

Marvin J. Weishaar

Mailing Address 405 Seaport Circle

City

Liberty

State

MO

Zip Code

64068

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	8

Transaction ID: 90121.C13148

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
C.

Full Name (Last, First, Middle Initial)

Tim Whitaker

Mailing Address P.O. Box 187

City

Trenton

State

MO

Zip Code

64683

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Motel Owner

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	8

Transaction ID: 90121.C13150

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Michael W. Wilson

Mailing Address 1018 NW Clinton County Line Road

City

Smithville

State

MO

Zip Code

64089-8215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Pharmacist

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 90121.C13175

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mark Wittmeyer

Mailing Address 15405 Highway HH

City

Platte City

State

MO

Zip Code

64079

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
AG

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 8

Transaction ID: 90121.C13260

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

9230.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 58

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Graves Victory Comm

Mailing Address 5920 NW 96th Terr

City

Kansas City

State

MO

Zip Code

64154-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

171041.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

Transaction ID: 90122.C13293

Amount of Each Receipt this Period

15041.41

Transfers From Affil./Aut-
h.
☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B.

Full Name (Last, First, Middle Initial)

RNC 2008 Joint Candidate Committee

Mailing Address 228 S. Washington Street - Suite 1

City

Alexandria

State

VA

Zip Code

22314-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

15839.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	0	8

Transaction ID: 90121.C13262

Amount of Each Receipt this Period

1445.27

Transfers From Affil./Aut-
h.
☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
C.

Full Name (Last, First, Middle Initial)

Power PAC

Mailing Address 2301 M Street, NW Suite 300

City

Washington

State

DC

Zip Code

20037-2900

FEC ID number of contributing
federal political committee.

C

C00095869

Name of Employer

Occupation

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	0	8

Transaction ID: 90121.C13266

Amount of Each Receipt this Period

1000.00

Transfer Memo

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

RJN 2008 Jt. Can. Comm.

SUBTOTAL of Receipts This Page (optional)

16486.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Martha M. Schar

Mailing Address 1300 South Ocean Boulevard

City

West Palm Beach

State

FL

Zip Code

33401-

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1157.90

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90121.C13264

Amount of Each Receipt this Period

172.90

Transfer Memo

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

2008 Jr. Can. Co. Acct.

B.

Full Name (Last, First, Middle Initial)

James I. Perkins

Mailing Address P. O. Box 288

City

Rusk

State

TX

Zip Code

75785-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Citizens 1st Bank

Occupation

Officer

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90121.C13265

Amount of Each Receipt this Period

250.00

Transfer Memo

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

2008 Jr. Can. Co. Acct

C.

Full Name (Last, First, Middle Initial)

Dwight C. Schar

Mailing Address 505 South Flager Drive
Suite 900

City

West Palm Beach

State

FL

Zip Code

33401-

FEC ID number of contributing
federal political committee.

C

Name of Employer
MVR Mortgage Co.

Occupation

Chairman

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1157.89

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 90121.C13263

Amount of Each Receipt this Period

172.89

Transfer Memo

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

2008 Jr. Can. Comm. Acct

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

16486.68

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Lathrop & Gage, LC.

Mailing Address 2345 Grand Blvd

City

Kansas City

State

MO

Zip Code

64108-2684

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

940.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 8

Transaction ID: 90127.C13297

Amount of Each Receipt this Period

531.68

Offsets to Operating Expenditure

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Media Placement Technologies

Mailing Address 336 Commerce St.

City

Alexandria

State

VA

Zip Code

22314-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12021.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90121.C13205

Amount of Each Receipt this Period

12021.31

Offsets to Operating Expenditure

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

12552.99

TOTAL This Period (last page this line number only)

12552.99

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Country Club Bank

Mailing Address P.O. Box 410889

City

Kansas City

State

MO

Zip Code

64141-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15192.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	8

Transaction ID: 81230.C13098

Amount of Each Receipt this Period

0.01

Interest Received

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B.

Full Name (Last, First, Middle Initial)

Country Club Bank

Mailing Address P.O. Box 410889

City

Kansas City

State

MO

Zip Code

64141-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15265.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 90121.C13291

Amount of Each Receipt this Period

73.22

Interest Received

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

73.23

TOTAL This Period (last page this line number only)

73.23

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
Payroll Processing Expenses
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81203.E4013
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1429.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL PROCESSING EXPENSES

B.

Full Name (Last, First, Middle Initial)
Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
Payroll Processing Expenses
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81230.E4121
Date of Disbursement

/ /

Amount of Each Disbursement this Period

126.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL PROCESSING EXPENSES

C.

Full Name (Last, First, Middle Initial)
Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
Payroll Processing Expenses
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81230.E4122
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1618.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL PROCESSING EXPENSES

SUBTOTAL of Disbursements This Page (optional)

3173.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Brandon R. Boswell Mailing Address 2912 Fredrick Avenue	Transaction ID: 81230.E4101 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div>
City Saint Joseph State MO Zip Code 64506- Purpose of Disbursement Expense Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>152.42</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXPENSE REIMBURSEMENT
B. Full Name (Last, First, Middle Initial) Brandon R. Boswell Mailing Address 2912 Fredrick Avenue City Saint Joseph State MO Zip Code 64506- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4103 Date of Disbursement <div>12</div> <div>01</div> <div>2008</div> Amount of Each Disbursement this Period <div>921.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
C. Full Name (Last, First, Middle Initial) Amy D. Cole Mailing Address 18804 E. 18th Street N City Independence State MO Zip Code 64058- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4104 Date of Disbursement <div>12</div> <div>01</div> <div>2008</div> Amount of Each Disbursement this Period <div>220.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

SUBTOTAL of Disbursements This Page (optional)

1293.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Country Club Bank Mailing Address P.O. Box 410889	Transaction ID: 81230.E4123 Date of Disbursement <div> <div>11</div> <div>28</div> <div>2008</div> </div>
City Kansas City State MO Zip Code 64141- Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>97.38</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BANK SERVICE CHARGE
B. Full Name (Last, First, Middle Initial) Country Club Bank Mailing Address P.O. Box 410889 City Kansas City State MO Zip Code 64141- Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90127.E4187 Date of Disbursement <div> <div>12</div> <div>31</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>73.22</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BANK SERVICE CHARGE
C. Full Name (Last, First, Middle Initial) Debra S. Gotzon Mailing Address 2156 N.E. Parvin Road City Kansas City State MO Zip Code 64116- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4125 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>460.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

SUBTOTAL of Disbursements This Page (optional)

630.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Patrick W. Graham Mailing Address 2330 S. 17th Street	Transaction ID: 81230.E4107 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City Saint Joseph State MO Zip Code 64503- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1050.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
B. Full Name (Last, First, Middle Initial) Patrick Hefflinger Mailing Address 1534 Burlington Avenue City Kansas City State MO Zip Code 64116- Purpose of Disbursement Mileage Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4100 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>29.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MILEAGE REIMBURSEMENT
C. Full Name (Last, First, Middle Initial) Patrick Hefflinger Mailing Address 1534 Burlington Avenue City Kansas City State MO Zip Code 64116- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4109 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>742.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

SUBTOTAL of Disbursements This Page (optional)

1821.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ashley M. Hurlbert</p> <p>Mailing Address 215W. Main S Apt. B</p> <p>City Smithville State MO Zip Code 64089-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81230.E4110 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </p> <p>Amount of Each Disbursement this Period <div>160.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SALARY</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Joshua E. Hulbert</p> <p>Mailing Address 215 W. Main S Apt. B</p> <p>City Smithville State MO Zip Code 64089-</p> <p>Purpose of Disbursement Expense Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81230.E4102 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </p> <p>Amount of Each Disbursement this Period <div>244.41</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>EXPENSE REIMBURSEMENT</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mary J. Jilka</p> <p>Mailing Address 18015 H Hwy.</p> <p>City Liberty State MO Zip Code 64068-</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81230.E4111 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </p> <p>Amount of Each Disbursement this Period <div>140.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SALARY</p>

SUBTOTAL of Disbursements This Page (optional)

544.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Mary M. Jilka

Mailing Address 18015 H Hwy.

City State Zip Code
Liberty MO 64068-

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81230.E4112

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

B.

Full Name (Last, First, Middle Initial)
Jason Klindt

Mailing Address 2500 Swift Avenue #105

City State Zip Code
Kansas City MO 64116-

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81230.E4113

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11350.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

C.

Full Name (Last, First, Middle Initial)
Brittney J. Loch

Mailing Address 945 S. Dunn

City State Zip Code
Maryville MO 64468-

Purpose of Disbursement
Expense Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 81230.E4099

Date of Disbursement

/ /

Amount of Each Disbursement this Period

148.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EXPENSE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

11528.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Brittney J. Loch Mailing Address 945 S. Dunn	Transaction ID: 81230.E4114 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div>
City Maryville State MO Zip Code 64468- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1628.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
B. Full Name (Last, First, Middle Initial) Nova Information Systems Mailing Address 7300 Chapman Highway City Knoxville State TN Zip Code 37920- Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90123.E4181 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>33.50</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD PROCESSING FEE
C. Full Name (Last, First, Middle Initial) Nova Information Systems Mailing Address 7300 Chapman Highway City Knoxville State TN Zip Code 37920- Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4098 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>536.83</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional)

2198.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Stor Safe <hr/> Mailing Address 1501 Burlington	Transaction ID: 90121.E4130 Date of Disbursement <div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Kansas City State MO Zip Code 64116- Purpose of Disbursement Payment Candidate Name <div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>2000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYMENT
B. Full Name (Last, First, Middle Initial) Stor Safe <hr/> Mailing Address 1501 Burlington	Transaction ID: 90123.E4184 Date of Disbursement <div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Kansas City State MO Zip Code 64116- Purpose of Disbursement Payment Candidate Name <div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>3000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYMENT
C. Full Name (Last, First, Middle Initial) Brent A. Turner <hr/> Mailing Address 1961 Larkspur	Transaction ID: 81230.E4116 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div>
City Liberty State MO Zip Code 64068- Purpose of Disbursement Salary Candidate Name <div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>30.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

SUBTOTAL of Disbursements This Page (optional) ►

5030.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Jenna L. Turner Mailing Address 1961 Larkspur	Transaction ID: 81230.E4117 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City State Zip Code Liberty MO 64068- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div> <div></div> <div>30.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
B. Full Name (Last, First, Middle Initial) UMB Visa Mailing Address 1010 Grand Blvd. City State Zip Code Kansas City MO 64106- Purpose of Disbursement Credit Card: See Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90121.E4132 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div> <div></div> <div>2629.04</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD: SEE BELOW
C. Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st Street, S.E. City State Zip Code Washington DC 20003- Purpose of Disbursement Event Expense - Food / Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90121.E4141 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div> <div></div> <div>1693.44</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT EXPENSE - FOOD / BEVERAGE

SUBTOTAL of Disbursements This Page (optional)

2659.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Caseys General Store #41

Mailing Address 912 Walnut Street

City Tarkio State MO Zip Code 64491-

Purpose of Disbursement

Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4137

Date of Disbursement

10 / 13 / 2008

Amount of Each Disbursement this Period

70.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

B.

Full Name (Last, First, Middle Initial)

Express Flight, Inc.

Mailing Address P.O. Box 3262, Station A

City Saint Joseph State MO Zip Code 64503-

Purpose of Disbursement

Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4136

Date of Disbursement

10 / 09 / 2008

Amount of Each Disbursement this Period

153.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address P. O. Box 36647

City Dallas State TX Zip Code 75235-

Purpose of Disbursement

Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4135

Date of Disbursement

10 / 07 / 2008

Amount of Each Disbursement this Period

451.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address P. O. Box 36647

City Dallas State TX Zip Code 75235-

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4140

Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

6.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

B.

Full Name (Last, First, Middle Initial)
Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4139

Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

C.

Full Name (Last, First, Middle Initial)
Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4134

Date of Disbursement

10 / 07 / 2008

Amount of Each Disbursement this Period

75.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Graves for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) UMB Visa</p> <p>Mailing Address 1010 Grand Blvd.</p> <p>City Kansas City State MO Zip Code 64106-</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90121.E4145</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 2</div> <div>0 6</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>2253.79</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CREDIT CARD: SEE BELOW</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Aladin Storage</p> <p>Mailing Address 701 North 291 Highway</p> <p>City Liberty State MO Zip Code 64068-</p> <p>Purpose of Disbursement Storage Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90121.E4170</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 1</div> <div>0 1</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>93.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: STORAGE RENTAL</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Federal Express Shipping</p> <p>Mailing Address 2903 Sprinkle Avenue</p> <p>City Memphis State TN Zip Code 38118-</p> <p>Purpose of Disbursement Shipping Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90121.E4151</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>1 0</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>36.77</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: SHIPPING CHARGES</p>

SUBTOTAL of Disbursements This Page (optional)

2253.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Federal Express Shipping

Mailing Address 2903 Sprinkle Avenue

City State Zip Code
Memphis TN 38118-

Purpose of Disbursement
Shipping Expense
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4149
Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING EXPENSE

B.

Full Name (Last, First, Middle Initial)
Federal Express Shipping

Mailing Address 2903 Sprinkle Avenue

City State Zip Code
Memphis TN 38118-

Purpose of Disbursement
Shipping Charges
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4155
Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

C.

Full Name (Last, First, Middle Initial)
Federal Express Shipping

Mailing Address 2903 Sprinkle Avenue

City State Zip Code
Memphis TN 38118-

Purpose of Disbursement
Shipping Charges
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90121.E4168
Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Federal Express Shipping	Transaction ID: 90121.E4162 Date of Disbursement
Mailing Address 2903 Sprinkle Avenue	<div> <div>10</div> <div>26</div> <div>2008</div> </div>
City Memphis State TN Zip Code 38118-	Amount of Each Disbursement this Period <div>27.37</div>
Purpose of Disbursement Shipping Charges Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING CHARGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Federal Express Shipping	Transaction ID: 90121.E4180 Date of Disbursement
Mailing Address 2903 Sprinkle Avenue	<div> <div>11</div> <div>05</div> <div>2008</div> </div>
City Memphis State TN Zip Code 38118-	Amount of Each Disbursement this Period <div>57.53</div>
Purpose of Disbursement Shipping Charges Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING CHARGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Federal Express Shipping	Transaction ID: 90121.E4161 Date of Disbursement
Mailing Address 2903 Sprinkle Avenue	<div> <div>10</div> <div>22</div> <div>2008</div> </div>
City Memphis State TN Zip Code 38118-	Amount of Each Disbursement this Period <div>17.40</div>
Purpose of Disbursement Shipping Charges Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING CHARGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Graves for Congress**A.**Full Name (Last, First, Middle Initial)
Free Conferencing Corp.

Mailing Address 110 W. Ocean Boulevard #C

City Long Beach State CA Zip Code 90802-

Purpose of Disbursement
Phone Expense
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Transaction ID: 90121.E4158
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Amount of Each Disbursement this Period

56.15

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PHONE EXPENSE

B.Full Name (Last, First, Middle Initial)
Free Conferencing Corp.

Mailing Address 110 W. Ocean Boulevard #C

City Long Beach State CA Zip Code 90802-

Purpose of Disbursement
Phone Expense
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Transaction ID: 90121.E4152
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	0	8

Amount of Each Disbursement this Period

79.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PHONE EXPENSE

C.Full Name (Last, First, Middle Initial)
Free Conferencing Corp.

Mailing Address 110 W. Ocean Boulevard #C

City Long Beach State CA Zip Code 90802-

Purpose of Disbursement
Phone Expense
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Transaction ID: 90121.E4179
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	0	8

Amount of Each Disbursement this Period

45.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Free Conferencing Corp.	Transaction ID: 90121.E4164 Date of Disbursement
Mailing Address 110 W. Ocean Boulevard #C	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 7 / 2 0 0 8</div> </div>
<div> <div>City Long Beach State CA Zip Code 90802-</div> <div> <div>Purpose of Disbursement</div> <div>Phone Expense</div> <div>Candidate Name</div> </div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>75.60</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: PHONE EXPENSE
B. Full Name (Last, First, Middle Initial) Midwest Express Airline	Transaction ID: 90121.E4174 Date of Disbursement
Mailing Address 6744 Howell Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 8</div> </div>
<div> <div>City Oak Creek State WI Zip Code 53154-</div> <div> <div>Purpose of Disbursement</div> <div>Travel Expense</div> <div>Candidate Name</div> </div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>155.50</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: TRAVEL EXPENSE
C. Full Name (Last, First, Middle Initial) Target	Transaction ID: 90121.E4150 Date of Disbursement
Mailing Address 4375 N. Chouteau Trafficway	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 0 / 2 0 0 8</div> </div>
<div> <div>City Kansas City State MO Zip Code 64117-</div> <div> <div>Purpose of Disbursement</div> <div>Supplies</div> <div>Candidate Name</div> </div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>81.40</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM] MEMO: SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Target

Mailing Address 4375 N. Chouteau Trafficway

City Kansas City State MO Zip Code 64117-

Purpose of Disbursement
Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90121.E4153

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

146.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SUPPLIES

B.

Full Name (Last, First, Middle Initial)
U. S. Postmaster

Mailing Address 820 Armour Road

City Kansas City State MO Zip Code 64116-

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90121.E4159

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

840.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

C.

Full Name (Last, First, Middle Initial)
US Government Printing Office

Mailing Address 8660 Cherry Ln.

City Laurel State MD Zip Code 20707-

Purpose of Disbursement
Event Expense - Host Gift

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90121.E4148

Date of Disbursement

10 / 08 / 2008

Amount of Each Disbursement this Period

45.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT EXPENSE - HOST
GIFT

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) USPS-NKC Mailing Address 820 Armour Rd	Transaction ID: 90121.E4167 Date of Disbursement <div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Kansas City State MO Zip Code 64116- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>5.80</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
B. Full Name (Last, First, Middle Initial) Wal-Mart #0234 Mailing Address 8551 N Boardwalk Ave City Kansas City State MO Zip Code 64154- Purpose of Disbursement Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90121.E4147 Date of Disbursement <div> <div>10</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>9.07</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SUPPLIES
C. Full Name (Last, First, Middle Initial) Wal-Mart #0234 Mailing Address 8551 N Boardwalk Ave City Kansas City State MO Zip Code 64154- Purpose of Disbursement Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90121.E4146 Date of Disbursement <div> <div>10</div> <div>08</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>3.53</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Dionne L. Vantuyl Mailing Address 3537 W. Walrond	Transaction ID: 81230.E4118 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div>
City Kansas City State MO Zip Code 64117- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>630.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
B. Full Name (Last, First, Middle Initial) Ceriln J. Watson Mailing Address 1510 N.E. 69th Terrace City Kansas City State MO Zip Code 64118- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4119 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>460.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
C. Full Name (Last, First, Middle Initial) Micah J. Watson Mailing Address 1510 N.E. 69th Terrace City Kansas City State MO Zip Code 64118- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81230.E4120 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>340.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

SUBTOTAL of Disbursements This Page (optional)

1430.00

TOTAL This Period (last page this line number only)

32562.59

SCHEDULE C (FEC Form 3)Use separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13bNAME OF COMMITTEE (In Full)
Graves for Congress

Transaction ID: LS80908.C11840

LOAN SOURCE Full Name (Last, First, Middle Initial)
Graves Victory Comm

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 5920 NW 96th Terrace

City Kansas City State MO ZIP Code 64154-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
03DD
31YYYY
2008

20080331

.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

10000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 53 / 58

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Boyles Motors, Inc.Nature of Debt (Purpose):
Vehicle Lease

Mailing Address 204 N. Market Street

City State ZIP Code
Maryville MO 64468-

Outstanding Balance Beginning This Period

500.00

Transaction ID: LS60802.E42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kwrt-am/kwrt-fmNature of Debt (Purpose):
Radio Advertising

Mailing Address 1600 Radio Hill Road

City State ZIP Code
Boonville MO 65233-

Outstanding Balance Beginning This Period

857.65

Transaction ID: LS60802.E45

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Willard DowdenNature of Debt (Purpose):
Rent for Nodaway Co. Repu-
bican Com

Mailing Address Route 1, Box 116

City State ZIP Code
Burlington Junction MO 64428-

Outstanding Balance Beginning This Period

200.00

Transaction ID: LS60802.E46

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional).....

1557.65

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 54 / 58

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Missouri Right to Life PACNature of Debt (Purpose):
Membership Labels

Mailing Address P.O. Box 651

City State ZIP Code
Jefferson City MO 65102-

Outstanding Balance Beginning This Period

1087.00

Transaction ID: LS60802.E49

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dirt Road ProductionsNature of Debt (Purpose):
TV Production

Mailing Address P.O. Box 1330

City State ZIP Code
Stowe VT 05672-

Outstanding Balance Beginning This Period

61874.89

Transaction ID: LS81203.E4052

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

61874.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Lukens CompanyNature of Debt (Purpose):
Direct Mail Expense

Mailing Address 2800 Shirlington Road

City State ZIP Code
Arlington VA 22202-

Outstanding Balance Beginning This Period

5145.64

Transaction ID: LS81203.E4046

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5145.64

1) **SUBTOTALS** This Period This Page (optional).....

68107.53

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 55 / 58

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Axiom Strategies LLCNature of Debt (Purpose):
Campaign Management

Mailing Address 2345 Grand

City State ZIP Code
Kansas City MO 64108-

Outstanding Balance Beginning This Period

109513.53

Transaction ID: LS81203.E4094

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

109513.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Midwest Computer and Business Services,Nature of Debt (Purpose):
IT Expenses

Mailing Address P.O. Box 1575

City State ZIP Code
Liberty MO 64069-

Outstanding Balance Beginning This Period

100.00

Transaction ID: LS81203.E4049

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mike Gula & AssociatesNature of Debt (Purpose):
Fundraising Consulting

Mailing Address 700 12th St. NW

City State ZIP Code
Washington DC 20006-

Outstanding Balance Beginning This Period

54.57

Transaction ID: LS81203.E4053

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.57

1) **SUBTOTALS** This Period This Page (optional).....

109668.10

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Stor Safe

Nature of Debt (Purpose):
Payment

Mailing Address 1501 Burlington

City State ZIP Code
Kansas City MO 64116-

Outstanding Balance Beginning This Period

3000.00

Transaction ID: LS90121.E4130

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Stor Safe

Nature of Debt (Purpose):
Payment

Mailing Address 1501 Burlington

City State ZIP Code
Kansas City MO 64116-

Outstanding Balance Beginning This Period

3000.00

Transaction ID: LS90123.E4184

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Campaign Solutions/The Donatelli Group

Nature of Debt (Purpose):
Blast E-Mail

Mailing Address 118 North Saint Asaph Street

City State ZIP Code
Alexandria VA 22314-

Outstanding Balance Beginning This Period

346.97

Transaction ID: LS81203.E4047

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

346.97

1) **SUBTOTALS** This Period This Page (optional).....

1346.97

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Award Service CompanyNature of Debt (Purpose):
Printer Expense

Mailing Address 1534 Burlington

City State ZIP Code
Kansas City MO 64116-

Outstanding Balance Beginning This Period

628.65

Transaction ID: LS81203.E4056

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

628.65

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Time Warner CableNature of Debt (Purpose):
Internet Expense

Mailing Address P.O. Box 2599

City State ZIP Code
Omaha NE 68103-

Outstanding Balance Beginning This Period

2.22

Transaction ID: LS81203.E4055

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.22

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Elliot BerkeNature of Debt (Purpose):
Legal ExpenseMailing Address Berke & Associates
1901 Pennsylvania Avenue NWCity State ZIP Code
Washington DC 20006-

Outstanding Balance Beginning This Period

3316.50

Transaction ID: LS81203.E4048

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3316.50

1) **SUBTOTALS** This Period This Page (optional).....

3947.37

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Enterprise Rent A Car

Nature of Debt (Purpose):
Car Rental

Mailing Address 809 S. State Route 291

City	State	ZIP Code
Liberty	MO	64068-

Outstanding Balance Beginning This Period

1496.89

Transaction ID: LS81203.E4054

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1496.89

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1496.89

2) **TOTALS** This Period (last page this line number only)..... ▶

186124.51

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

10000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

196124.51